	CLAIMS AS FILED - PART I						10004337				
	TOTAL CLAIMS			ımn 1)	(Column 2)	TYPE		OR	OTHER THA SMALL ENTI		
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lr		(Column 1	AMENDI	(Column 2) (Column HIGHEST		SMAL	SMALL ENTITY		OTHER THA		
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i.	(Column 2) (Column 3) CLAIMS HIGHEST							رن ۸			
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**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											
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Effective October 1, 2003